

State of Colorado
Energy & Carbon Management Commission



Document Number:
404339538

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Date Received:
09/03/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10633
Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC
Address: 555 17TH STREET SUITE 3700
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name Phone Email
Luke Kelly 970-939-6353 lkelly@civiresources.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714300207
Inspection Date: 08/04/2025 FIR Submit Date: 08/20/2025 FIR Status:

Inspected Operator Information:

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Company Number: 10633
Address: 555 17TH STREET SUITE 3700
City: DENVER State: CO Zip: 80202

LOCATION - Location ID:

Location Name: Number: County:
Qtrqtr: NENW Sec: 27 Twp: 2N Range: 68W Meridian: 6
Latitude: 40.115305 Longitude: -104.991594

FACILITY - API Number: 05-123-00 Facility ID: 491036

Facility Name: Miller 22-27 Number:
Qtrqtr: NENW Sec: 27 Twp: 2N Range: 68W Meridian: 6
Latitude: 40.115305 Longitude: -104.991594

CORRECTIVE ACTIONS:

1 CA# 207343

Corrective Action: Pursuant to Rule 912.b.(6) Operator is required to submit a Form 19 Supplemental Report for the associated spill within 90 days of the spill date requesting closure pursuant to Rule 913.h and supported by adequate documentation to demonstrate that the Spill or Release has been fully cleaned up and complies with Table 915-1; or A Form 27 if any of the criteria listed in Rules 912.b.(6).B.i±iii apply. If Remediation will continue under an approved Form 27, the Operator will also submit a Form 19± Supplemental which requests closure of the Spill or Release and includes the Remediation project number assigned by the Director.

Date: 10/30/2025

Response: CA COMPLETED Date of Completion: 09/03/2025

Operator has filed a Form 19 Doc # 404334216 in order to comply with Rule 913 & Rule 912.

Operator
Comment:

ECMC Decision:

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA follow-up has been completed for this location.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Aubrey Noonan

Signed:

Title: Sr. Regulatory Analyst

Date: 9/3/2025 9:48:09 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

404339545	Report Resolution
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Total Attach: 1 Files